	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate sche for each category Detailed Summary	of the	FOR LINE NUMBER: PAGE 57 OF 76 (check only one) 17
	y information copied from such Reports and Statements n for commercial purposes, other than using the name and			person for the purpose of soliciting contributions
\rangle	NAME OF COMMITTEE (In Full) Jim Tracy for Congress			
A.	Full Name (Last, First, Middle Initial) TOMMY HODGES Mailing Address 2417 HWY 231 N City State SHELBYVILLE TN Purpose of Disbursement CONTRIBUTION REFUND GENERAL Candidate Name Office Sought: House Disbursement For Senate Primary President Other (s	General	Category/ Type	Date of Disbursement 09 05 2014 Amount of Each Disbursement this Period 2400.00 Transaction ID: SB20.296
3.	Full Name (Last, First, Middle Initial) HOLLY HOLLINGSHEAD Mailing Address 7291 WEST JEFFERSON PIKE		Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City State SMYRNA TN Purpose of Disbursement CONTRIBUTION REFUND GENERAL Candidate Name Office Sought: House Disbursement For Senate Primary President Other (s	General	Category/ Type	Amount of Each Disbursement this Period 2600.00 Transaction ID: SB20.259
Э.	Full Name (Last, First, Middle Initial) JEFFREY M. HOLLINGSHEAD Mailing Address 7291 WEST JEFFERSON PIKE			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
·		General	Category/ Type	Amount of Each Disbursement this Period 2600.00 Transaction ID : SB20.265
SUBTOTAL of Disbursements This Page (optional)				

TOTAL This Period (last page this line number only).....